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CONFIRMATION NO. 1698

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|---|--|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/892,413  | <b>FILING OR 371(c) DATE</b><br>07/15/2004<br><b>RULE</b>  | <b>CLASS</b><br>521           | <b>GROUP ART UNIT</b><br>1711   | <b>ATTORNEY DOCKET NO.</b><br>12169-C10 |                                |
| <b>APPLICANTS</b><br>Raghuram Gummaraju, Novi, MI;<br>Gene M. Scheffler, Browns, MI;<br>Heinz Plaumann, Browns, MI;<br>Theodore M. Smiecinski, Woodhaven, MI;<br>Todd J. Green, Canton, MI;   |  |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of 10/391,925 03/19/2003 PAT 6,797,736<br><b>** FOREIGN APPLICATIONS *****</b>   |  |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/01/2004</b>  |  |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i> |  | <b>STATE OR COUNTRY</b><br>MI | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>41               | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>AIR MAIL<br>28484   |  |                               |   |   |                                |
| <b>TITLE</b><br>Composition for forming a foamed article and an article of furniture having the foamed article disposed therein   |  |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>1278  | <b>FEES: Authority has been given in Paper</b><br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |